



DIABETES IN LAURENS COUNTY

SC Department of Health and Environmental Control

◆ Diabetes Control Program ◆ Chronic Disease Epidemiology Branch
Diabetes Initiative of South Carolina

Diabetes mellitus, a chronic disease characterized by elevated blood sugar levels, is a significant contributor to morbidity and mortality in South Carolina and throughout the United States. Diabetes can cause debilitating and costly complications such as blindness, renal failure, lower extremity amputations, and cardiovascular disease. Much of the health and economic burden of diabetes can be averted through known prevention measures.

In 1998, 5.7 percent of South Carolina adults, equivalent to approximately 163,000 adults, reported having been diagnosed with diabetes. Diabetes was the sixth leading cause of death in South Carolina claiming 1,029 lives in 1997 and contributing to another 3,014 deaths. This report presents the burden of diabetes in Laurens county.

Behavioral Risk Factors

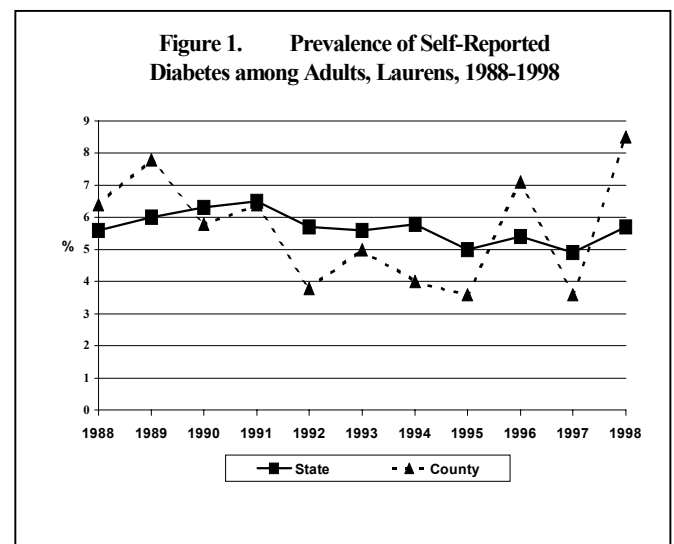
Table 1 displays the prevalence of major behavioral risk factors for diabetes and its complications in Laurens county and SC in 1998.

Table 1. Prevalence (%) of
Behavioral Risk Factors for Diabetes

	Laurens County	SC
Overweight	56.9	52.3
Current Smokers	24.5	24.7
Physical Inactivity	63.9	61.6
Consuming fruits and vegetables less than 5-A-Day	79.9	78.2
Hypertension	24.1	26.7
High Cholesterol	31.6	24.4

Prevalence

In 1998 there were approximately 4,063 adults (8.5%) aged 18 and older living in Laurens county who have been told by a doctor some time in their life that they have diabetes (Figure 1).



Morbidity and Complications

In 1997, there were 116 hospital discharges with diabetes as the primary diagnosis among Laurens county residents. During the same year, there was an additional 1139 hospital discharges with diabetes-related condition. Compared to whites, African-Americans had more hospitalizations for diabetes as the primary diagnosis - 61 (52%), and fewer hospitalizations for diabetes as a related diagnosis - 414 (36%).

In 1997, hospital charges for hospitalizations of Laurens county residents having diabetes as primary diagnosis were up to \$1.057 million and

\$14.5 million for diabetes as a related condition. The total length of hospital stay for diabetes as the primary diagnosis was 1193 days.

Laurens county patients with diabetes who had diabetes-related complications in 1997 included:

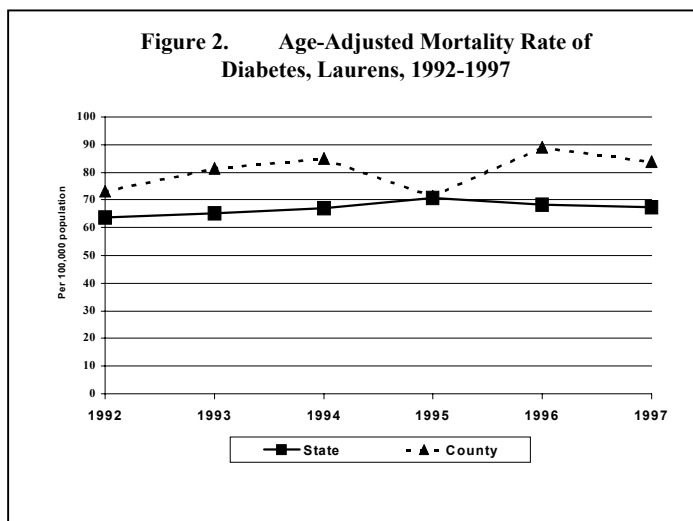
- 113 (9.1%) with renal manifestations;
- 37 (2.9%) with lower extremity amputations related to diabetes;
- 41 (3.3%) with diabetic ketoacidosis;
- 43 (3.4%) with renal failure;
- 22 (1.7%) with dialysis.

Adults with diabetes are at increased risk of developing cardiovascular disease. Out of 1235 hospitalizations for patients with diabetes, 1006 (81%) had cardiovascular diseases, and 149 (12%) had stroke.

In 1997, there were 121 emergency room (ER) visits for diabetes as the primary diagnosis, among which 75 (61.9%) were for African-American patients. In addition, there were 824 ER visits for diabetes as a related condition. Total ER charges for diabetes as the primary diagnosis was \$66,193.

Mortality

In 1997, diabetes was listed as the underlying cause of death for 7 residents of Laurens county. This is an age-standardized mortality rate of 25.1 per 100,000 population, lower than the state average of 39.2 per 100,000 population (Figure 2). Diabetes was listed as a contributing cause in 75 deaths in Laurens county; a standardized mortality rate of 83.8 per 100,000 population.



A total of 449 potential years of life were lost in 1997 because people died prematurely from diabetes. Diabetes mortality in Laurens county follows the national pattern of diabetic mortality that African-Americans has higher mortality rates than whites. African-American men had the highest standardized mortality (151.8 per 100,000 population) among all race-sex groups.

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